

2st Available Copy

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	299	3/22/95
TYPIST	336	4/6
VERIFIER	315	4/6/95
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	9/22/95
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SYMBOLS

- ✓ Rejected
- Allowed
- (Through numerals) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
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Original	
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